



## Guidance document for processing PM-JAY packages

### Holmium Laser Prostatectomy

Procedures covered: 3

Specialty: Urology

Package name	Procedure name	HBP 1.0 code	HBP 2.0 code	Package price (INR)	ALOS (in Days)
Holmium Laser Prostatectomy	Holmium Laser Prostatectomy	S700094	SU079A	40,000	2

#### Minimum qualification of the treating doctor:

**Essential:** MCh/DNB or Equivalent (in Urology)

**Special empanelment criteria/linkage to empanelment module:** Tertiary care facilities & registered for holmium laser.

#### Disclaimer:

For monitoring and administering the claim management process of **Holmium Laser Prostatectomy**, NHA shall be following these guidelines. This document has been prepared for guidance of PROCESSING TEAM and TRANSACTION MANAGEMENT SYSTEM of AB PM-JAY for the claims of procedures mentioned above. The hospitals can also refer to this document so that they have the insight on how the claims will be processed. However, this document doesn't provide any guidance on clinical and therapeutic management of patient. In that respect the hospitals and physicians may refer to any other relevant material as per the extant professional norms.

### PART I: GUIDELINES FOR CLINICIANS AND HEALTHCARE PROVIDERS

#### 1.1 Objective:

The purpose of this section is to act as a guidance & a clinical decision support tool for the clinicians in deciding the line of treatment, plan clinical management of patient and decide referral of cases to the appropriate level of care (as required) for treatment of patients under PMJAY and selection of corresponding Health Benefit Package.

It will also serve as a tool for hospitals to determine and submit the mandatory documents required for claiming reimbursement of health benefit package under PMJAY.

#### 1.2 Clinical key pointers:

**Holmium Laser Prostatectomy** is a minimally invasive treatment for an enlarged prostate. Also called holmium laser enucleation of the prostate (HoLEP). This procedure uses laser to remove tissue that is blocking urine flow through the prostate, also cur the prostate tissue in to easily removable fragments.

Is a minimally invasive technique is the use of a holmium:yttrium–aluminium–garnet (YAG) laser.

## Indications:

- Benign Prostatic Hyperplasia (BPH) a non-malignant enlargement of the prostate
- The procedure is used both for resection and enucleation of prostatic tissue.

## Management/Procedure:

- Usually Potassium-titanyl-phosphate (KTP) and holmium lasers are used to cut and/or enucleate the prostate these are widely used laser techniques.
- HoLEP uses the excellent incisional and hemostatic properties of the holmium laser wavelength.
- Lasers deliver heat to the prostate in various ways. Lasers heat prostate tissue, causing tissue death by coagulative necrosis, with subsequent tissue contraction; however, laser coagulation of the prostate in this specific sense has met with limited results.
- HoLEP removes the entire portion of the prostate that can block urine flow.
- HoLEP also preserves removed tissue that can be examined in the laboratory, investigations.
- There are four steps to performing HoLEP:
  - creation of bladder neck incisions,
  - enucleation of the median lobe,
  - enucleation of the lateral lobes off the prostatic capsule, and
  - transurethral morcellation.
  - In most cases, postoperative irrigation is not needed and the catheterization time is less than 24 hours.

## 1.3 Mandatory documents- For healthcare providers

Following documents should be uploaded by the concerned hospital staff at the time of pre-authorization and claims submission:

Mandatory document	Holmium Laser Prostatectomy
<b>i. At the time of Pre-authorization</b>	
a. Clinical notes including evaluation findings and planned line of treatment	Yes
b. USG with Prostate size and Post Void Volume , Prostate-Specific Antigen (PSA), Uroflowmetry report confirming the diagnosis	Yes
c. Is the hospital registered for holmium laser?	Yes
<b>ii. At the time of claim submission</b>	
a. Detailed Indoor case papers	Yes
b. Histopathology report	Yes
a. Detailed Procedure / Operative Notes	Yes

b. Detailed discharge summary	Yes
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## **PART II: GUIDELINES FOR PROCESSING TEAM**

## **PART III: GUIDELINES FOR TRANSACTION MANAGEMENT SYSTEM (TMS)**

3.1 **Objective:** To enable setting up of cross check mechanisms/rule engines within the IT platform (TMS) to ensure compliance with STGs and to prevent fraud / abuse of the Health Benefit Package.

3.2 **Below mentioned are the scenarios where a provision would be built in TMS for pop-ups:**

- I. Was the Clinical notes and USG with prostate size and Post Void Volume, Prostate-Specific Antigen PSA, Uroflowmetry report are indicative of the procedure? Yes

Till the time the functionality is being developed, the processing doctors shall check the above manually.

### **References:**

1. Tan, Andrew H H, and Peter J Gilling. "Holmium laser prostatectomy: current techniques." Urology vol. 60,1 (2002): 152-6. doi:10.1016/s0090-4295(02)01648-5
2. <https://emedicine.medscape.com/article/445722-overview>
3. <https://www.mayoclinic.org/tests-procedures/holmium-laser-prostate-surgery/about/pac-20384871>